

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-878)

SERIAL NO. 10 / 526175 FILING DATE

APPLICANT(S)

CLAIMS

AP. FILED	AFTER		AFTER		AP. FILED	
	1ST AMENDMENT	IND.	DEP.	2ND AMENDMENT	IND.	DEP.
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TOTAL IND.	5					
TOTAL DEP.	13					
TOTAL CLAIMS	18					

TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			

THIS FORM IS FOR USE WITH FORM PTO-878  
MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS